

NJPCA & Hospital Alliance Conference
Increasing Access Through... “Establishing Successful Community Health Center
and Hospital Collaborations”
June 7, 2012

Acknowledgments

Kathy Grant Davis – Pres. & CEO NJ Primary Care Association

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On behalf of Gov. Christie I want to thank both NJPCA & HANJ for their commitment to improving health care for all NJ residents.

The Governor strongly values the work of our hospitals and FQHCs & has demonstrated his support in this year’s budget—investing over \$1B in the health care safety net

I want to recognize Department Staff here today:

- Dr. Arturo Brito, Deputy Commissioner, Public Health Services
- Alison Gibson, Acting Assistant Commissioner, Health Facilities Evaluation and Licensing
- Linda Anderson, Director, Office of Primary Care and Rural Health

I am so pleased to see so many of you here today who are excited about collaborating with health care partners.

A key priority of the Department is working smarter—internally but also with partners.

Health Care Transformation

Spending a day focusing on collaboration is a great way of getting us all out of our silos in the healthcare industry, and thinking broadly about all the sectors working together toward a common goal that benefits us all.

Although the venues of delivery differ, both hospitals and community health centers share similar goals—providing the highest quality care and improving the health of our residents.

Hospitals and FQHCs both have different strengths and by working together they can leverage resources to improve the health of residents.

This is a transformative time for the health care delivery system.

As health care continues to evolve—with a greater emphasis on coordination of care, bundled payments and Health Information Technology—it is in the best interests of hospitals and health centers to forge a closer working relationship and share best practices. It will result in better health outcomes and lower health care costs.

For example, the work of Cooper University Hospital and the Camden Coalition of Healthcare Providers in better managing patient needs by providing medical homes for “frequent flyers” of the ERs of Camden Hospitals was recently recognized by CMS with a \$2.8 million innovation grant. The Camden Coalition of Healthcare Providers is doing great work to for the residents of the city, their membership includes Cooper, CAMcare, Virtua Health and Our Lady of Lourdes Medical Center—just to name a few.

Prevention and better management of chronic conditions are also key factors for the future of the health care landscape. According to the Centers for Disease Control and Prevention—chronic diseases are responsible for 70% of deaths of Americans each year and 75% of the nation’s health care spending. In NJ, the cost of treating those with chronic diseases totals about \$7.5 billion (CDC & Milken Institute State Chronic Disease Index).

Given that the nation is expected to spend \$4.6 trillion on health care in 2020 (according to the Medicare Office of the Actuary)—there is an urgency to increase efficiency in the delivery of health care and on medical homes to manage medical conditions and avoid costly ER visits and hospital readmissions.

Community health providers—both hospital-based and federally qualified health centers—have served as medical homes since their creation. They provide primary medical, dental, mental health, case management and health education.

Having this medical home is critical to patient success. Studies have demonstrated that care delivered by primary care physicians in a medical home model—is associated with better outcomes, reduced mortality, fewer preventable hospital admissions for patients with chronic diseases, lower utilization and improved patient compliance

Working Together

So how do we bridge the traditional disconnect between primary health care and tertiary care?

One of the major tools to connect providers will be the use of health information technology—a theme you will hear more about today.

Our regional health teams—in the cities of Camden, Newark and Trenton—are using data sharing as an essential tool in managing patients with high needs which results in significant ER diversion and improved quality of life for the patients

The Department provided grant funding to the Trenton Health Team to support their health information exchange. The Trenton Health Team is a collaborative alliance comprised of the City of Trenton, all three of Trenton’s hospitals (Capital Health – Mercer Campus, Capital Health – Fuld Campus and St. Francis Medical Center) as well as Henry J. Austin Health Center, Trenton’s only Federally Qualified Health Center (FQHC). I had the opportunity to meet with the Trenton Health Team and heard about the great progress they are making in improving health in the city of Trenton.

In one example, a patient made 64 visits to the ER from 2010 to 2011, and 6 were extended hospitalizations related to complications with diabetes and kidney disease among other conditions. After engagement by THT, the patient incurred zero ER visits the following year, complied with treatment recommendations and dialysis, and avoided hospitalization completely the following year.

I know Dr. Perry and Dr. Alli are here today and they will tell you more about their successes.

In addition to the Trenton Health Team—you will hear about some other collaborations which can be replicated in your community.

For example, the NJ Primary Care Association, NJ Hospital Association and the Department of Human Services worked together on a pilot that examined overuse of emergency departments. Supported by a \$4.8 million grant from the federal Centers for Medicare and Medicaid Services, the project closely followed utilization of two hospital emergency departments and tested interventions to help patients receive primary care services in a more appropriate and less expensive setting. Newark Beth Israel Medical Center and Monmouth Medical Center served as the pilot sites, in tandem with their respective local health centers, the Newark Community Health Center and the Monmouth Family Health Center—who will present on this later today.

Another example of regional collaboration is the Greater Newark Healthcare Coalition—their membership includes East Orange General Hospital, St. Michael's Medical Center, Newark Beth Israel Medical Center, the Visiting Nurses of Central Jersey, Newark Community Health Centers, University Hospital and Seton Hall University, just to name a few. I recently met with them and discussed their focus on the issue of premature birth. There are experiencing high volumes in their NICUs. Many members of the coalition and the Department are partnering with the March of Dimes on the Health Babies are Worth the Wait initiative focused on African American women in Newark, which aims to reduce the preterm birth rate and improve outcomes for both mothers and babies.

Whether it is information sharing, emergency department diversion, sharing staff, co-locating facilities—there are different tools that can improve the health of the residents you serve as well as reduce costs for your facility.

Closing

The Department wants to see more collaboration at the local/community level. We want to see you performing joint needs assessments and share data to identify needs or gaps in care.

Sharing data about top diagnoses, hot spots, and letting that information drive how the need is met—is the way to bring meaningful change to the quality of care in our community.

As health care leaders, you are on the front lines of this transition. By joining forces, you will ensure improved health outcomes, improve the quality of care and reduce health care costs.

I applaud your participation in today's event. And I thank the Hospital Alliance and the Primary Care Association for sponsoring this event. The Governor, Department and I stand ready to work with you and support your efforts.

Joining together we can promote a patient centric approach across the state and ensure we comprehensively and holistically manage New Jersey patients' health and increase coordination, quality and efficiency of health care delivery.